

(Print Name of lobbyist)

### STATE OF NEW HAMPSHIRE

### 2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

RECEIVED
APR 27 2017

•	ist(s) _Christiana L. T byist's partnership, t		•	_	DEPARTMENT OF S
	hire Bankers Associat				
(1	Name of partnership, fire	n or corporation)			
PO Box 2586_		Concord		NH	03302-2586
Business Address:	(Street)	(Town/City)		(State)	(Zip Code)
( 603 )224-537. (Telephon		(603) 224-3381(Fax)		_cthornton@nl	hbankers.com
	t covers: (Choose one e transactions which				nay file a separate report for
$oxdot{X}$ All reportable tr	ransactions occurring i	n the months prior to t	he reporting d	ate relative to the	he following client:
-	re Bankers Associati (Full Name of Clie	onnt as it appears on the Lo	bbyist Registrat	tion Form)	
OR  ☐ All reportable tr unrelated to any pa		yist (including the lob	byist's family	), or the lobbying	ng firm listed below which are
IV. Date of Repor Reports cover:	t April 26, 2 activity from date of re		•	26, 2017     14/1/17 to 6/30/1	17
	October 25, 201 activity from 7/1/17			ary 31, 2018 🗆 n 10/1/17 to 12/3	
					the last report. If State House, Room 204,
VI. Check if ad	ditional reports are a	ittached:			
	ceived fees or made ex		file Addendui	m A– Fees and	Expenses
□ If you have pai Expense Reimburse		imbursed expenses, yo	ou must file <b>A</b> c	<b>idendum B</b> – R	eport of Honorariums or
∐ If you, your fir	m, or your family has	made political contrib	utions, you mu	ist file <b>Addend</b>	lum C- Political Contributions
I have read RSA 15	Affirmation by Lobb 5, RSA 13-B, RSA 14- e best of my knowledg	C and RSA 664 and h	ereby swear o	r affirm that the	e foregoing information is true
_XXMnWM		1		_4/26/17	ate)
(Signature of lobby	yist)	- <del>-</del>		(D	ate)
Christiana L. Th	ornton				

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### STATE OF NEW HAMPSHIRE



# Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s)Christiana L. Thornton / Thomas F. Fahey							
II. Name of lobbyist's partnership, firm or corporation, if any:							
New Hampshire Bankers Association(Name of partnership, firm or corporation)							
III. Name of Client New Hampshire Bankers Association	Date	4/26/2017					
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:	relations	s, or public relations services					
a) Total of all fees received in this reporting period	a) \$	6,865.46					
b) Total of all fees received this calendar year, prior to this reporting period b) \$0.00							
c) Total of all fees received to date (Add lines a and b)	c) \$	6,865.46					
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$	0.00					
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to represes. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report in Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	lient and aggrega penses; e: meals s than \$ d with a rting per e of gre r than \$2 expense	if expenditures are made by iled for the lobbyist(s)/firm. Ite total of all expenses paid (b) the aggregate total of all purchased during a business 10 that is given to the person value of \$25.00 or less); and iod of greater than \$25.00 for ater than \$25, purchase of a 25, but not greater than \$50, a reimbursement, or political					
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$	28,482.69					
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	L\$	0.00					
c) Total of all itemized expenditures reported in detail in section VI.	c) \$	18,000.00					

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$46,482.69
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$0.00
f) Total of all expenses year to date	f) \$46,482.69
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from period, including by whom paid or to whom charged.	lobbying fees during this reporting
Gallahan & Gartrell PC quarterly (monthly \$6,000.00) lobbying retainer	Amount:
paid by New Hampshire Bankers Association	\$18,000.00
paid by New Hampshire Bankers Association	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	<del></del>
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affin	en that the foregoing information
is true and complete to the best of my knowledge and belief.	in that the foregoing information
Duhrund Clus	4/26/2017
(Signature of lobbyist)	(Date)
Christiana L. Thornton	
(Print Name of lobbyist)	

### State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

## Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporation: _New Hampshire Bankers Association  Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client):							
Date of Report (check	k one):						
April 26, 2017 X	July 26, 2017 🗆	October 25, 2017 □	January 31, 2018 □				
			nd Expenses described above, and number of Addendum forms being				
_X Addendum A	(s).						
Addendum B	(s).						
Addendum C	(s).						
_	rm that the foregoing ir f my knowledge and be		ent and each Addendum is true and				
Them	Hole	1	4/26/2017				
(Signature of lobbyist)			(Date)				
Thomas F. Fahey		)					
(Print Name of lobby)	st)						